

**PATENT APPLICATION**

**OLIFF & BERRIDGE, PLC**  
**Telephone: (703) 836-6400**  
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Attorney Docket No.: 124096

**CUSTOMER NUMBER 25944**

**AMENDMENT TRANSMITTAL**

In re the Application of

Leena SILAKOSKI

Group Art Unit: 1731

Application No.: 10/537,613

Examiner: E. HUG

Filed: June 3, 2005

For: A METHOD OF MANUFACTURING A PRESS FELT, AND A PRESS FELT, WITH THE SHAPE OF  
A CLOSED LOOP

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.  
☐ Small entity status of this application has been established.

Any additional claim fees have been calculated as shown below:

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD'L FEE	OR	RATE	ADD'L FEE
TOTAL CLAIMS	*18 MINUS	**20	=0	x 25	\$		x 50	\$
INDEP CLAIMS	*6 MINUS	***3	=3	x 100	\$		x 200	\$600
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 180	\$	OR	+ 360	\$
					\$			\$600

\* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.

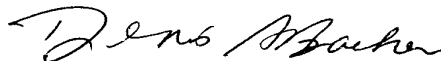
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ The fees are being paid electronically with this filing. The Commissioner is hereby authorized to charge any additional fee (or credit any overpayment) associated with this communication to Deposit Account No. 15-0461.

Respectfully submitted,



James A. Oliff  
Registration No. 27,075

Denis A. Backer  
Registration No. 58,988

JAO:DAB/can  
Date: September 5, 2007